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## BIB DATA SHEET

CONFIRMATION NO. 7115

|  |   |  |                                   |   |                           |                                |
|--|---|--|-----------------------------------|---|---------------------------|--------------------------------|
| <b>SERIAL NUMBER</b><br>10/565,280   | <b>FILING or 371(c) DATE</b><br>01/20/2006<br><b>RULE</b>   | <b>CLASS</b><br>341                                      | <b>GROUP ART UNIT</b><br>2117     | <b>ATTORNEY DOCKET NO.</b><br>01807.107508.   |                           |                                |
| <b>APPLICANTS</b><br>Philippe Piret, Cesson-Sevigne, FRANCE;<br>Philippe Le Bars, Thorigne-Fouillard, FRANCE;<br>Frederic Lehobey, Rennes, FRANCE;<br><b>** CONTINUING DATA *****</b><br>This application is a 371 of PCT/IB04/02623 07/21/2004<br><b>** FOREIGN APPLICATIONS *****</b><br>FRANCE 0308868 07/21/2003 <i>01</i><br><b>** IF REQUIRED, FOREIGN FILING LICENSE GRANTED **</b><br>07/03/2006 |   |  |                                   |   |                           |                                |
| Foreign Priority claimed <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No<br>35 USC 119(a-d) conditions met <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No<br>Verified and Acknowledged <i>Quidjan</i><br>Examiner's Signature   |   | <input type="checkbox"/> Met after Allowance<br>Initials | <b>STATE OR COUNTRY</b><br>FRANCE | <b>SHEETS DRAWINGS</b><br>2   | <b>TOTAL CLAIMS</b><br>18 | <b>INDEPENDENT CLAIMS</b><br>5 |
| <b>ADDRESS</b><br>FITZPATRICK CELLA HARPER & SCINTO<br>30 ROCKEFELLER PLAZA<br>NEW YORK, NY 10112<br>UNITED STATES   |   |  |                                   |   |                           |                                |
| <b>TITLE</b><br>Information encoding by shortened reed-solomon codes   |   |  |                                   |   |                           |                                |
| <b>FILING FEE RECEIVED</b><br>2160   | FEES: Authority has been given in Paper<br>No. _____ to charge/credit DEPOSIT ACCOUNT<br>No. _____ for following: |  |                                   | <input type="checkbox"/> All Fees<br><input type="checkbox"/> 1.16 Fees (Filing)<br><input type="checkbox"/> 1.17 Fees (Processing Ext. of time)<br><input type="checkbox"/> 1.18 Fees (Issue)<br><input type="checkbox"/> Other _____<br><input type="checkbox"/> Credit |                           |                                |